

PART B - FEE(S) TRANSMITTAL

OCT 29 2008

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7590 10/09/2008

Thomas Osborn
 Otis Elevator Company
 Intellectual Property Department
 Ten Farm Springs
 Farmington, CT 06032

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<i>MARY ANN T. Valk</i>	(Depositor's name)
<i>Mary Ann Valk</i>	(Signature)
10-29-08	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/554,131	10/20/2005	Mary Ann T. Valk	OT-5177	9185 10/29/2008 NNGUYEN2 00000100 10554131

TITLE OF INVENTION: ELEVATOR DISPATCHING WITH BALANCED PASSENGER PERCEPTION OF WAITING
 01 FC:1501 1510.00 OP
 02 FC:1504 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	\$15575.00	\$300	\$0	\$15575.00	01/09/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
SALATA, ANTHONY J	2837	187-280000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	1 _____ 2 _____ 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

OTIS ELEVATOR COMPANY

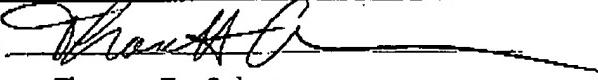
Farmington, CT USA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check is enclosed.
<input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted)	<input checked="" type="checkbox"/> Payment by credit card, Form PTO-2038 is attached.
<input type="checkbox"/> Advance Order - # of Copies _____	<input checked="" type="checkbox"/> The Director is hereby authorized to charge the amount of any deficiency, or credit any overpayment, to Deposit Account Number 15-0750 (enclose an extra copy of this form).

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<input type="checkbox"/> a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	

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Authorized Signature 

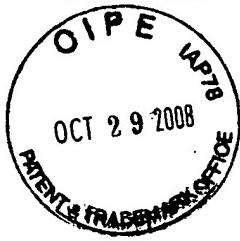
Date October 20, 2008

Typed or printed name Thomas H. Osborn

Registration No. 40,752

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ADDRESSEE: Mail Stop Amendment FAX: 571-273-2885

SENDER: Mary Krywonis

TOTAL NUMBER OF PAGES INCLUDING LEAD SHEET: 3

DATE: October 29, 2008
RE: US Patent Application 10/554,131
ELEVATOR DISPATCHING WITH BALANCED PASSENGER
PERCEPTION OF WAITING
Our File: OT-5177 THO

I hereby certify that the following document (attached) is being facsimile transmitted to the U.S. Patent and Trademark Office at (571) 273-2885 on October 29, 2008 for filing in the above-referenced application:

- Issue/Publication Fee Transmittal (Form No. PTOL-85); and
- Credit Card Form PT0-2038.

Mary M. Krywonis

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